

VERIFICATION OF CERTIFICATE OF DEPOSIT

State Form

SEND TO: DEPARTMENT OF MINES AND MINERALS

DIVISION OF OIL AND GAS

P. O. BOX 2244

FRANKFORT, KY 40601

Gentlemen:

Bank Name

Address

This is to advise you that the undersigned, pursuant to obligations set forth in KRS 353.590, does hereby assign, transfer to and pledge with the Department of Mines and Minerals all right, title and interest of the undersign in and to the Certificate of Deposit issued by or carried with

Phone Number

City and State			Zip Code
E-mail Address			
and identified as Certificate of Deposit # interest on the certificate is the property of the a		face amount of \$, except that
The assignment constitutes collateral security for	or performance o	f the assignor's obligat	ions under KRS 353.590.
The undersigned appoints the Director for the D true and lawful attorney of the undersigned to do which shall become due under the certificate of negotiation and to endorse any commercial pap may permit automatic renewal of the certificate of the undersigned warrants that the Certificate of delivered to the Director; that the Certificate of the undersigned is the owner thereof free and clill power, right and authority to execute and de	emand, collect, a deposit and to e er given in paym of deposit on any f Deposit is contended to genuin lear of all liens a	and receive all amounts indorse the certificate of ent of the certificate of maturity date. Imporaneously with the e and is in all respects and encumbrances; and	s, excluding interest, of deposit for payment or deposit. The Director e execution hereof being what it purports to be; tha
Signature	Date Signed	If Corporation, Title	
Signature	Date Signed	If Corporation, Title	
SIGNATURE GUARANTEE AND L	JNDERTAKING	BY THE FINANCIAL I	NSTITUTION
The signature(s) of the assignor(s) appearing at	bove (were) mad	e in the presence of th	e Undersigned Officer of

Financial Institution By

Signature Date Signed

This institution shall save and hold harmless the Department of Mines and Minerals and the State of Kentucky from all loss, claims, and litigation which it may suffer in consequence of its action in reliance upon and pursuant

the Financial Institution in the above collateral assignment and is (are) herewith guaranteed by it.

The Director of the Division of Oil and Gas, Department of Mines and Minerals herewith acknowledges receipt of the above assignment and agrees to act there under.

Director, Division of Oil and Gas, Department of Mines and Minerals	Date Signed

to the above assignment.